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## City of Seattle **Department of Planning and Development**

**Applicant Services Center** 700 Fifth Avenue. Suite 2000 P. O. Box 34019 Seattle, WA 98124-4019 (206) 684-8850 www.seattle.gov/dpd

## BUILDING OR MECHANICAL PERMIT CONTACT DISCLOSURE FORM

Washington State law requires posting of this information for all projects with a value of more than \$5,000 and the disclosure of the contractor and license number whenever a contractor is used. This must be completed. The owner or owner's agent is responsible for the accuracy of this information.

form must be posted on the job site along with the permits of this project. All categories of this form THIS INFORMATION IS REQUIRED AT APPLICATION FILING: Project Number: Site Address Legal Description/Tax Number: Property Owner's Name: Address: Phone Number: TO BE COMPLETED AS SOON AS THE INFORMATION IS AVAILABLE, BUT PRIOR TO THE START OF ANY WORK AUTHORIZED UNDER THE PERMIT NOTED ABOVE: Owner/lessee to serve as contractor for all work Prime Contractor Firm Name: Contact Name Address: Phone Number: Contractor License: Lending Institution or Construction Bonding Agent Firm Name: Contact Name Address: Phone Number: REQUIRED AT THE TIME OF PERMIT ISSUANCE: All required information has been provided at the time of permit issuance. I hereby acknowledge that I have not selected the contractor and therefore have not provided information on the contractor as required. I understand that the information on the contractor will be required to be provided on the job site prior to the start on any work authorized by the permit noted above. Name: Relationship: REQUIRED AT START OF WORK IF INFORMATION IS NOT PROVIDED: Noncompliance: Owner must sign here if complete information is not provided prior to the start of the work authorized on the above referenced permit. I refuse to comply with this request for information as required by RCW 19.27.095

Relationship:

Name: